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Substitute for form 1449/PTO	Application Number 10705189			
INFORMATION DICCI OCURE	Filing Date	Concurrently		
INFORMATION DISCLOSURE	First Named Inventor	Melody A. Smith-		
STATEMENT BY APPLICANT	Art Unit	3714		
(Use as many sheets as necessary)	Examiner Name	P. Suhol		
Sheet 1 of 1	Attorney Docket Number			

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Examiner nitials*	Cite No. <sup>1</sup>	Document Number  Number-Kind Code <sup>2 (7 known)</sup>	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages or Releva Figures Appear	
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	FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T⁵		
		Country Code <sup>3</sup> Number <sup>4</sup> Kind Code <sup>5</sup> (if known)	MM-DD-YYYY					
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Translation is attached.

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